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MESSAGE: Atty, Docket No.: H9630-0003-P903 Inventor: Robert J. HALES Application No.: 92/897,429 Filing Date: July 3, 2001 SYSTEM AND METHOD FOR NETWORK INFRASTRUCTURE Title: MANAGEMENT Documents Field: 1. Credit Card Payment Form PTO-2038 (Charge \$1,110) (1 p) 2. Transmittal Form PTO/SB/21 (1 p) 3. Fee Transmittal Form PTO/SB/17 (1 p) 4. Reguest for Extension of Time (2 pp) 5. Amendment & Response (14 pp)					
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Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 09/897,429 Application Number July 3, 2001 TRANSMITTAL Filing Date Robert J. HALES **FORM** First Named Inventor 2123 Art Unit Jason Scott PROCTOR Examiner Name (to be used for all correspondence after initial filing) H0630-0003-P003 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Drawing(s) Fee Transmittal Form Appeal Communication to Board of Credit Card Form (1 p) Licensing-related Papers Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Petition Amendment / Reply (14 pp) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Change of Correspondence Address Status Letter Affidavlts/declaration(s) Other Enclosure(s) (please Terminal Disclaimer Extension of Time Request (2pp) identify below): 1. Facsimile Cover Sheet (1p) Request for Refund Express Abandonment Request CD, Number of CD(s) _____ Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Document(s) Remarks Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Bergman & Song LLP Signature Michael Bergman Printed name TO 0 8 2010 Reg. No. 42.318 Date CERTIFICATE OF TRANSMISSION/MAILING Certificate of Facsimile Transmission under 37 C.F.R. §1.8 I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, facsimile number 571-273-8360, on: Signature OCT 0 8 2010 Date Michael Bergman Reg. No.: 43,318 Typed or printed name This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to the (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. PEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

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Effective on 12/08/2004.	Application Number	09/897,429					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Filing Date	July 3, 2001					
FEE TRANSMITTAL	First Named Inventor	Robert J. HALES					
For FY 2008	Examiner Name	Jason Scott PROCTOR					
Applicant Claims small entity status. See 37 CFR 1.27	Art Unit	2123					
TOTAL AMOUNT OF PAYMENT (\$) \$1,110	Attomay Docket No.	H0630-0003-P003					
METHOD OF PAYMENT (check all apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 50-3950	Deposit Account Deposit Account Number: 50-3950 Deposit Account Name: Bergman & Song LLP						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
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FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FILING FEES SEARCH FEES	_	ION FEES all Entity					
Small Entity Small Entity Small Entity Small Entity Small Entity Fee (\$) Fee (\$)		Fees Paid (\$)					
Utility restar restar		\$ 0.00					
Design Plant							
Reissue							
	0 0	0					
2. EXCESS CLAIM FEES		Small Entity					
Fee Description Fee (5)							
Each claim over 20 (including Reissues)							
Each independent claim over 3 (including Reissues)							
Multiple dependent claims <u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee Pa</u>	id (\$)	Multiple Dependent Claims					
$-20 \text{ or HP} = 0 \times .00 = 9$	0.00	Fee (\$) Fee Paid (\$)					
HP = highest number of total claims paid for, if greater than 20.	F.E.AGS	.00					
Indep. Claims Extra Claims Fee (\$) Fee Pa	<u>sid (\$)</u> \$ 0.00						
-3 or HP = 0 X \$0.00 = 5 HP = highest number of independent daims paid for, if greater than 3.	<u> </u>						
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
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Total Sheets Extra Sheets Number of each additional 50 or traction thereor results -100 = -100 /50 = -2 (round up to a whole number) ×							
4. OTHER FEE(S)							
Non-English Specification, fee (no small entity discount)							
Other (e.g., late filing surcharge): Three Month Extension of Time \$1,110							
SUBMITTED BY Registrati	on No. 42,318	Telephone 617-868-8870					
Signature (Attornay/A	,	सार्व के वे शास					
Name (Dist(Tune) Michael Remman		Date VLIVO ZUIV					

Name (Pnn/Type)

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